

MISSISSIPPI FORESTRY COMMISSION

FIREWISE ADMINISTRATION REPORT

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Name:		Month:		
I.	Contacts and Contact Information			
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	2.			
	3.			
	4.			
	5.			
	6.			
II.	Activities			
	1. School/Youth Programs:	Number of Participants:		
	2. Adult Presentations:	Number of Participants:		
	3. Displays:	NI 1 CD (' '		
	4. Radio Programs:	Stations:		
	5. Television Programs:	Stations.		
	6. Print Media Items:	Name of Media:		
	7. Firewise Media Trailer Uses:			
	8. Firewise Landscape Trailer Uses			
III.	Other Firewise Events			
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		5.		
	3.			
IV.	• •			
	1. 2008 WUI Grant, Expense Code 131H			
	Name:	<u></u>		
	Total Hours:			
Con	nments: (If your work cannot be listed above	e, list county and accomplishments below.)		
Plan	se send your monthly Firewise Administrat	ive Report by 1700 on the last working day of the month		